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## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration
Submitted
with Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number		08563-0087			
First Named Inventor		GREENSPAN, Larry A.			
COMPLE	TE IF	KNOWN			
Application Number		N/A			
Filing Date		November 27, 2000			
Group Art Unit		N/A			
Examiner Name		N/A			

	required)	,						
		_						
	As a below named inventor, I hereby declare that:							
	My residence, mailing address, and citizenship are as stated below next to my name.							
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
	METHOD AND APPARATUS FOR CASE BUILDING AND PRESENTATION OF HEALTHCARE PROCEDURES							
	(Title of the Invention)							
	the specification of which							
	is attached hereto OR as United States Application Number or PCT International							
	OR as United States Application Number or PCT International was filed on (MM/DD/YYYY)							
	(if applicable).							
	Application Number and was amended on (MM/DD/YYYY)							
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
	I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.	-						
	Prior Foreign Application Number(s)  Foreign Filing Date Priority Certified Copy Attached?  Not Claimed YES NO							

☐ Additional foreign application numbers	s are listed on a supplemental priority of	data sheet PTO/SB/02B attached hereto:	
I hereby claim the benefit under 35 U.S.	C. 119(e) of any United States provisi	onal application(s) listed below.	
Application Number(s)	Filing Date (MM/DD/YYYY)		
60/234,103	September 21, 2000	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.	

[Page 1 of 2]

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Charte Chart



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## DECLARATION — Utility of Design Patent Application

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Address								
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Country		Telephon	e				Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief ar believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INV	ENTOR:			A petit	ion has b	een file	ed for this unsi	gned inventor
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Inventor's Signature						•	Date	
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Mailing Address								
City Sparks	State	MD		ZIP	21152		Country	USA
NAME OF SECOND INVENTOR	•			A peti	tion has t	een file	ed for this unsi	igned inventor
Given Name (first and middle [if any]) Steven Michael Family Name or Surname Mallot								
I					•			
Inventor's Signature			T		1		Date	
Residence: City Towson			State M	ID	Country	USA	Citizenship	US
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Mailing Addres								
	State	MD.		71D ^	1006	-	C untry IIS	
City Towson  XX Additional inventors are being named		<u>MD</u> ⊴suppleme	ntal Addition	ZIP 2		et(s) PTO		

PTO/SB/02A (11-00)

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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor					his unsigned inventor		
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<b>City</b> Manchester	Stat	e MD		<b>ZIP</b> 21102	Count	ry USA	
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City Baltimore	State	MD	ZIP 21237 C untry USA				

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